

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 6 OF 11
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Tanium Inc. Federal Political Committee (a.k.a. Tanium PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wayland, Mark, , ,

Mailing Address 2100 Powell Street, Suite 300

City
EmeryvilleState
CAZip Code
94608FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tanium Inc.Occupation (for Individual)
Chief Revenue Officer

Receipt For: 2019

☐ Primary ☐ General
☒ Other (specify) ▼

Aggregate Year-to-Date ▼

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	09	/	2019

Transaction ID : INCA19

Amount of Each Receipt this Period

2700.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hindawi, David, , ,

Mailing Address 2100 Powell Street, Suite 300

City
EmeryvilleState
CAZip Code
94608FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tanium Inc.Occupation (for Individual)
Executive Chairman

Receipt For: 2019

☐ Primary ☐ General
☒ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	20	/	2019

Transaction ID : INCA22

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hindawi, Hanna, , ,

Mailing Address 2100 Powell Street, Suite 300

City
EmeryvilleState
CAZip Code
94608FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NoneOccupation (for Individual)
None

Receipt For: 2019

☐ Primary ☐ General
☒ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	20	/	2019

Transaction ID : INCA23

Amount of Each Receipt this Period

5000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

12700.00

TOTAL This Period (last page this line number only)..... ►